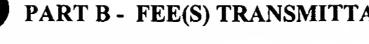
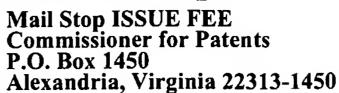
Complete and send this form, together with applicable fee(s), to: Mail

## PART B - FEE(S) TRANSMITTAL





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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

|   | CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any 33797 7590 11/29/2004 |   | ny change of address)  |                       |   | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, much ave its own certificate of mailing or transmission. |  |   |  |
|---|---|---|--|-----------------------|---|--|--|---|--|
| MILLER THOM   | PSON, LLP<br>ET WEST, SUITE 2500<br>15H 3S1                                     | FEB   | 2 8 200  |                       | I hereby certify that<br>States Postal Servic<br>addressed to the M | Certificate of M<br>this Fee(s) Tra<br>e with sufficien<br>fail Stop ISSU  | ailing or Trans  nsmittal is being  t postage for fir  E FEE address | smission g deposited with the Unite st class mail in an envelop above, or being facsimil late indicated below.  (Depositor's name |  |
| FC:2501   | 700.00 OP   | V.  | ADEMA  |                       |   |  |  | (Signature  |  |
| FC:1504   | 300.00 OP   |   |  |                       |   | -  |  | (Date   |  |
| APPLICATION NO.   | FILING DATE   | FIRST NAMED INVEN   |  | ΓOR                   | ATTORNEY DOCKET NO.   |  | CONFIRMATION NO.   |   |  |
| 10/617,112  | 10/617,112 07/11/2003   |   |  | Bruce Mead            |   |  | 55773-02/EJG 2607  |   |  |
| APPLN. TYPE   | SMALL ENTITY  | ISSUE FE  | F  | DII                   | BLICATION FEE   | TOTAL F  | EE(S) DUE  | DATE DUE  |  |
|   | ·   |   |  | \$700 \$300           |   | <del>-\$9</del> 85 \$1000  |  | 02/28/2005  |  |
| nonprovisional YES  |   |   |  |                       |   | <b>_</b>   | 965 \$1000   | 02/28/2003  |  |
| EXAMINER  |   | ART UNIT  |  | CL                    | ASS-SUBCLASS  |  |  |   |  |
| CHAPMAN,  | 3635  | 35 052-126600   |  |                       |   |  |  |   |  |
| 1. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/1.  "Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required. | Correspondence  | 2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |  |                       |   |  |  |   |  |
| 3. ASSIGNEE NAME AND  | RESIDENCE DATA TO B   | E PRINTED ON TI   | HE PATEN   | T (print o            | r type)   | ····   |  |   |  |
| PLEASE NOTE: Unless recordation as set forth in   | s an assignee is identified be a 37 CFR 3.11. Completion of                     | low, no assignee dof this form is NOT   | ata will app<br>a substitute   | ear on the for filing | ne patent. If an assignment.  | ignee is identifi  | ed below, the d  | locument has been filed for   |  |
| (A) NAME OF ASSIGN  | EE  | (B)   | RESIDEN  | CE: (CIT              | Y and STATE OR C  | COUNTRY)   |  |   |  |
| ASM Modular   | Systems Ltd.  |   | Missi  | ssaug                 | a, Ontario  | Canada   |  |   |  |
| Please check the appropriate  | e assignee category or categor  | ries (will not be prin  | nted on the j  | patent):              | ☐ Individual 🖾  | Corporation or   | other private gre  | oup entity Governmen  |  |
| 4a. The following fee(s) are  | enclosed:   | 4b.   | Payment of   | Fee(s):               |   |  |  |   |  |
| Issue Fee   |   |   | A check in the amount of the fee(s) is enclosed.   |                       |   |  |  |   |  |
| Publication Fee (No small entity discount permitted)  Advance Order - # of Copies   |   |   | Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, Deposit Account Number (enclose an extra copy of this form). |                       |   |  |  |   |  |
| 5. Change in Entity Status  | (from status indicated above  |   |  |                       |   |  |  | <u></u>   |  |

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature \_

Gierczak Eugene J.A. Typed or printed name \_

Registration No. 315690

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Re:

Our File:

55773.02

Invention:

Top Levelled Access Floor System (As Amended)

**Application No.:** Filed:

July 11, 2003 **United States** 

10/617,112

Country: Inventor:

**Bruce Mead** 

Assignee: **Examiner:**  **ASM Modular Systems Ltd.:** 

Jeanette E. Chapman 3635 **Art Unit:** 

**Due Date:** 

February 28, 2005

Commissioner of Patents P.O. Box 1450 MAIL STOP ISSUE FEE Alexandria, VA 22313-1450 U.S.A.

Dear Sir/Madams:

Agent for Applicant acknowledges receipt of Notice of Allowance and Issue Fee Notice dated November 29, 2005 and encloses herewith:

- completed Issue Fee Transmittal form; 1.
- our firm cheque in the amount of US\$1000.00 in payment of the issue and publication fee. 2.

Agent for Applicant respectfully states that the title is incorrect and should read "TOP LEVELLED ACCESS FLOOR SYSTEM". This amendment was requested in responses filed with the Examiner on July 6, 2004 and Nov. 11,2 004.

## **CONCLUSIONS**

Agent for Applicant awaits confirmation of the issue date and number.

Yours faithfully,

Agent for Applicant Eugene J.A. Gierczak (Registration NO. 31,690) MILLER THOMSON LLP

**Barristers & Solicitors** 20 Queen Street West, Suite 2500 Toronto, Ontario Canada M5H 3S1 Telephone No. 416.596.2132 Telecopier No. 416.595.8695

EJAG\*d - encl.

cc: Bruce Mead

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